

**DIVISION QUALIFYING MEET**  
**11 AND OLDER**  
**Kino Pool**  
**July 13, 2016**

**Girls Boys**

Event	Event	Age	Stroke	Distance
29	30	11 – 12	Freestyle	50 yd
31	32	13 – 14	Freestyle	50 yd
33	34	15 – 17	Freestyle	50 yd
35	36	11 – 12	Backstroke	50 yd
37	38	13 – 14	Backstroke	50 yd
39	40	15 – 17	Backstroke	50 yd
41	42	11 – 12	Butterfly	50 yd
43	44	13 – 14	Butterfly	50 yd
45	46	15 – 17	Butterfly	50 yd
47	48	11 – 12	Breaststroke	50 yd
49	50	13 – 14	Breaststroke	50 yd
51	52	15 – 17	Breaststroke	50 yd
53	54	11 – 12	I.M.	200 yd
55	56	13 – 14	I.M.	200 yd
57	58	15 – 17	I.M.	200 yd

***Volunteers Needed:***

Your help is needed as a meet volunteer. We cannot run these meets without parent help. Volunteers are needed to help time and are asked to work behind the blocks.

**Parent information**

Please make sure you select the number that corresponds to the correct boys or girls event and check the correct stroke. Fill in the information below. Limit is three events. Use caution when signing up for events. Participants swimming strokes illegally will be disqualified. Please keep the top half of this sheet so you will remember which events you have entered

Each night will begin at 5pm with warm-ups starting at 4:15pm

The Championship Meet will be a straight meet starting at 5pm. Ages 10 and under will warm-up at 4:00pm and ages 11 and older at 4:25pm. If you qualify for Swim Championships you will be automatically entered and do not need to fill out another form.

**Entry Form**

Please print and fill in all information, return this form to your coach by noon, Thursday, June 30th, 2016. **NO LATE ENTRIES WILL BE ACCEPTED.**

Name \_\_\_\_\_ Team \_\_\_\_\_  
(Last) (Name)

Sex \_\_\_\_\_ Age on first day of program \_\_\_\_\_ Date of Birth \_\_\_\_/\_\_\_\_/\_\_\_\_ Phone number \_\_\_\_\_

Events entered by number, stroke, and time.

1. # \_\_\_\_\_ Stroke \_\_\_\_\_ Your time \_\_\_\_\_
2. # \_\_\_\_\_ Stroke \_\_\_\_\_ Your time \_\_\_\_\_
3. # \_\_\_\_\_ Stroke \_\_\_\_\_ Your time \_\_\_\_\_

Entrant assumes automatic acceptance of the "waiver of responsibility". Parents, please sign to indicate you are aware of which events your child is swimming.

Parent Signature \_\_\_\_\_ Date \_\_\_\_\_